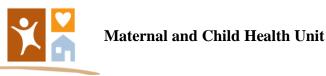


A PROGRAM FOR CHILDREN and Youth WITH SPECIAL HEALTH CARE NEEDS

Provider Handbook





Wyoming Department of Health, Public Health Division, 307-777-6921

Telephone and Address Reference For Children's Special Health

For provider inquiries regarding **general questions/concerns**, a request for a visit from CSH Staff, or CSH Policies

Call or write to:

Children's Special Health 6101 Yellowstone Road, Suite 420 Cheyenne, WY 82002

Telephone: (307) 777-6921 Fax: (307) 777-7215

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Programs Overview

Section 1: Wyoming Maternal and Child Health Programs Overview

A. The Maternal and Child Health Program

The Maternal and Child Health (MCH) programs are located in the Public Health Division, Wyoming Department of Health. Funding is provided by the Wyoming General Fund and Title V of the Social Security Act, Maternal and Child Health (MCH) Block Grant. The general purpose of the Maternal and Child Health funding is to enable each state to:

- Assure mothers and children access to quality maternal and child health services
- Reduce infant mortality and the incidence of preventable diseases, injuries, and disabling conditions among children
- Provide rehabilitation services to the extent such services are not provided under Supplemental Security Income (SSI); and Medicaid
- Provide and promote family-centered, community-based, coordinated, and culturally appropriate care (including care coordination services) for mothers, infants, children, and adolescents (including children with special health care needs) and to facilitate the development of community-based services for this population

Children's Special Health (CSH) is the part of the MCH program that provides medical services and care coordination for eligible children through CSH and the local Public Health Nursing offices.

Children's Special Health (CSH) is a public health program. The role of public health is to provide assessment, policy development, and assurance of services based on the needs of the population served. The MCH Block Grant process asks us to take a leadership role in assuring family-centered, community-based, coordinated systems of care in Wyoming. This means our job is to help communities assess the health status of children with special needs and their health service needs, and to supply services for those who may be underserved or at risk for public health problems. We are able to provide payment of medical specialty care because we have assessed there is a significant population of infants and children who have limited or no payment sources. Children's Special Health also provides care coordination services because we have identified that families of children with special needs are often isolated and have limited access to specialized services and support in our state. Because CSH is a public health program, we have established data collection systems to allow for program evaluation and outcome measures for the infants, children, and adolescents

we serve. This data will help communities plan for future service system changes.

B. Definitions

Children's Special Health has adopted the elements of family-centered, community-based, coordinated and culturally appropriate care within our philosophy and in our assessment, policy development, and assurance activities. The elements of family-centered care provide a framework and common language for program planning and implementation. The definitions are as follows:

Family-Centered Services

- Recognize the family as the constant in the child's life
- Promote parent-professional collaboration at all levels
- Share complete and unbiased information with parents in a consistent and supportive manner
- Recognize family strengths and individuality, and respect different methods of coping
- · Are flexible, accessible, and responsive to family needs
- Address developmental concerns as the child grows to adulthood
- · Facilitate family to family support and networking

Community-Based Services

- Provide services within or near the child's home community
- Promote continuity of care and follow-up
- Support families so they can care for their children at home whenever possible
- Promote normal patterns of living for the child and family
- Provide referral outside the community as needed (with information sharing back to the local community)
- Assure that services are developed and supported by the community

Coordinated Services

- Provide multiple services from different providers in a complementary, consistent, and timely manner
- Allow for efficient use of limited resources
- Prevent delays, overlaps, and gaps in services
- Require teamwork

Culturally Appropriate Services

- Recognize the cultural diversity of families who have children with special health care needs
- Acknowledge and honor the cultural traditions, values, and diversity of families
- Recognize that perceptions about chronic illness, disability, health, and ability are influenced by culture
- Adapt practice skills to fit the family's cultural context

Family-Centered, Community-Based, Coordinated, Culturally Appropriate Care Benefits the Child and Family!

The Child...

- Grows and develops toward an independent adulthood
- Develops a positive self-image
- Is knowledgeable about his/her condition or disability

The Family...

- Understands the child's diagnosis, prognosis, and treatment plan
- Feels comfortable caring for the child
- Effectively uses a range of resources
- Maintains social and financial stability

Family-centered, community-based, coordinated, culturally appropriate care allows the child with a complex disease, chronic condition, or disability to participate as fully as possible in all aspects of family and community life to realize his/her full potential.

The Medical Home

A Maternal and Child Health program goal is to assure that every child has a medical home. The medical home is a key component to the family-centered, community-based, coordinated care. Children's Special Health has adopted the American Academy of Pediatrics' description of the medical home. If you are a specialist or sub-specialist, please assure our special health care needs patients have been, or are referred to, a medical home. It is our hope providers who do not feel comfortable providing the medical home for a particular child will express this to the family and refer the child to a pediatrician, family physician, or other practitioner that will provide this care.

The American Academy of Pediatrics states that the medical home should encompass the following services:

- A. Provision of preventative care including, but not restricted to, immunizations, growth and development assessments, appropriate screening, healthcare, supervision, and patient and parental counseling about health and psycho-social issues
- **B.** Assurance of ambulatory and inpatient care for acute illnesses, 24 hours a day, 7 days a week; during the working day, after hours, on weekends, 52 weeks of the year
- C. Provision of care over an extended period of time to enhance continuity
- **D.** Identification of the need for specialty consultation and referrals knowing from whom and where these services can be obtained. Provision of medical information about the patient to the consultant. Evaluation of the consultant's recommendations, implementation of recommendations that are indicated and appropriate, and interpretation of these to the family
- **E.** Interaction with school and community agencies to be certain that special health needs of the individual child are addressed
- **F.** Maintenance of a central record and database containing all pertinent medical information about the child, including information about hospitalizations. This record should be accessible, but confidentiality must be assured.

Source: For the Children, CHS publication, reprinted 1996. American Academy of Pediatrics, Ad Hoh Task Force on the Definition of the Medical Home, PEDIATRICS (Issue 00314005), 1992.

Program Information

Section 2: CSH Program, Eligibility, and Covered Services

A. General Summary of Program

The purpose of Children's Special Health is to locate, track, diagnose, treat, and assist in coordination of care for children in the state of Wyoming using family-centered, community-based approach. CSH provides coverage for congenital defects and chronic conditions that may allow for rehabilitation.

B. Eligibility Requirements

- Applicants must be living in Wyoming with the intent to stay long enough to benefit from treatment
- Eligibility is determined by the CSH program administration
- Families must meet financial and medical eligibility guidelines
- Financial eligibility is determined by comparing the family's gross income and family size to a table based on 200% of the current Federal Poverty Level
- Medical eligibility is determined by the Program Manager or designee with oversight and support from the Division Administrator
- Families with Medicaid, Kid Care CHIP, or health insurance coverage may be eligible for CSH
- Families are notified of eligibility status via a letter from CSH

C. Referral

- Local Public Health Nursing offices are responsible for application procedures and care coordination services. They are the local Children's Special Health representative
- All Medicaid patients who fit medical eligibility should be referred. Children's Special Health provides care coordination for these patients
- Families may qualify for care coordination services only. There is no financial eligibility for this service
- Public Health Nurses (PHN) screen families for CSH eligibility and refer to other community resources
- CSH can supply you with CSH brochures for your office
- PHN's send completed applications to the state CSH office for eligibility determinations and data collection

D. Description

Children's Special Health covers a broad array of congenital defects, chronic diseases, disabling conditions, and conditions that allow for rehabilitation. Services are available for Wyoming infants and children under 19 years of age. Some of the common diagnoses covered are:

Developmental Delay Congenital Heart Disease Seizure Disorder Cerebral Palsy Cleft Lip and Palate Neurological Problems
Scoliosis
Hearing Loss
Tumors w/ Significant Survival
Potential

E. Covered Services

- Care Coordination
- Diagnostic Evaluations/Consultations
- Well Child Care (Coverage limited to Pediatrician)
- Medical specialty or sub-specialty care and hospital services
- Laboratory and radiology
- Certain medications, equipment, and prosthetics
- Travel assistance

F. Non-covered or excluded diagnoses/services:

- Acute illness
- Infectious disease
- Acute trauma
- Acute surgical conditions unrelated to CSH covered diagnosis
- Allergies
- Mental illness
- Psychological, psychiatric, or counseling services
- Ground or air ambulance

G. Pediatric Specialty Clinics

Children's Special Health provides financial support for Outreach Pediatric Specialty and Sub-specialty Clinics. These clinics are available to anyone who needs them. Clinic schedules are available on our website, http://www.health.wyo.gov/familyhealth/csh/Metabolicsandgenetics.html. Families should obtain a referral from their primary physician for new clinic patients. Children who have a financial need should apply for CSH and Medicaid.

H. Letters/Communication to Providers

- Eligibility letters are sent to parents with a copy to the PHN
- Notice of ineligibility letters are sent to parents with a copy to the PHN
- <u>Appointment letters</u> for upcoming appointments are sent to providers and parents, with a copy to the PHN

Enrollment and Billing Information

Section 3: Enrollment and Billing Information

A. New Provider Information and Instructions

Providers not currently enrolled with CSH are required to sign a MCH Participating Provider Agreement (see B. below). No services will be eligible for payment until the new provider is approved by Children's Special Health.

B. Maternal Child Health Participating Provider Enrollment Agreement Information and Instructions

ALL providers must submit a signed MCH Participating Provider Agreement. The purpose of the Agreement is to assure provider understanding of CSH expectations and requirements, and the program in general. Please note that this is NOT a legal document. We are committed to families and providers and we believe that by working as partners we can help families attain positive outcomes (See Appendix A for sample Agreement).

C. Claims Processing

CSH claims processing is handled by Conduent (formerly Conduent), the fiscal agent for Medicaid. All claims must be sent to:

Conduent PO Box 547 Cheyenne, WY 82003

- All claims for CSH eligible patients will be processed through Conduent, the Medicaid fiscal agent
- Submit claims to Conduent via mail or electronic media (WINASAP electronic billing)
- DO NOT SEND CLAIMS TO CSH
- Providers must follow all Medicaid billing procedures and requirements per the Wyoming Medicaid Provider Manual, including pre-authorization and third party liability
- All CSH approved providers must also be enrolled with Conduent as a Medicaid provider to receive reimbursement. If you are not an enrolled Medicaid provider, call the Provider Relations Unit at Conduent at (800) 251-1268

D. Reimbursement/Fee Schedule

The CSH/Medicaid relationship with Conduent has allowed CSH to adopt the Medicaid fee schedule. Claims are processed and checks mailed weekly. Checks are mailed with the Remittance Advice if the claims are approved for payment.

Occasionally a child requires a service or equipment that is not a covered Medicaid benefit. Children's Special Health may approve and pay for such services or equipment if the physician or members of the healthcare team deem it medically necessary. Children's Special Health can generate a State of Wyoming voucher and pay providers directly for these special requests.

E. Billing Instructions

Children's Special Health claims for physician, hospital, and all other services MUST be coded as per Medicaid requirements. Please refer to the Wyoming Medicaid Provider Manual for complete instructions. Please take time to review the Medicaid manual to assure your claims are successfully submitted. If you receive a large number of denials from Conduent, please ask for assistance. There are many common coding errors that are easy to fix.

PLEASE NOTE: Children's Special Health only children (children who do not have Medicaid) are locked into their approved diagnosis(es). All services billed should be directly related to the approved diagnosis. Children's Special Health approved providers, diagnoses, and ICD-9 codes are listed on the eligibility and appointment letters.

Providers should bill their usual and customary charge for the service provided.

- Children's Special Health requires a copy of the referral or a verbal referral from the physician to the PHN for comprehensive evaluations
- Medical reports must be sent to CSH, PHN, and other providers as needed to assure timely coordination of referrals and services

F. Physician Services Procedure Coding for Children with Special Health Care Needs

Providing better care for a child with a chronic illness requires more time than is typically spent with other children in your practice, more frequent visits, care coordination with other healthcare professionals and with the child's family. There are many potential financial challenges facing the implementation of the medical home in physician practices. This includes accurate and accountable coding for the extended time and services provided to families and children with special health care needs.

Additional codes that may be used for Medical Home care coordination

activities are:

- 99354 prolonged service (first 30-74 mins)
- 99355 prolonged service (each additional ½ hour)
- 99358 E/M before and after patient care
- 99359 E/M before and after patient care additional ½ hour
- 99374 care plan oversight/home care 15-29 mins
- 99379 care plan oversight/nursing facility 15-29 mins
- 99380 care plan oversight/nursing facility 30 mins plus

Children's Special Health is available to answer questions regarding billing concerns.

Medical Reports

Section 4: Medical Reports and Optional Provider Report Form

Children's Special Health requires medical reports for initial eligibility and for all evaluations and follow-up care from physicians, audiologists, and other providers. Hospital admit and discharge summaries and reports of operations are required for hospital services. Medical records must be sent directly to CSH as soon as possible. Do not attach medical reports to claims sent to Conduent unless required to do so per Medicaid policy. Children's Special Health receives a weekly printout and has direct access to Conduent claims information for review of paid claims. If CSH does not have a medical record upon claims review, it will be requested.

It is essential for CSH to review and file medical reports to document accountability of expenditures, for quality assurance, and for efficient, effective care coordination services.

 Please provide LEGIBLE office notes, medical reports, or the optional Provider Report form (Appendix B) to: CSH, PHN, referring physician, other providers, and parents/guardians as requested

Medical records must include the following information at a minimum:

- Patient Name
- Date of Service
- Provider Name
- Objective (Findings)
- Assessment (Diagnosis)
- Recommendations, treatment
- Referrals (Who, What, Where, When)
- Specific follow-up plans, next appointment date

Optional Report to CSH Form

Providers may choose to use the optional Provider Report form (Appendix B). Send via FAX or mail. This form has space for the data listed above. This form can serve as a tool to quickly inform CSH and Public Health Nurses about provider recommendations so we can approve services and assist families with follow-through. The form can also be shared with parents/guardians or other providers.

Children's Special Health Care Coordination

Section 5: CSH Care Coordination

Children's Special Health provides care coordination services at two levels, at the state office and by the local Public Health Nurse.

State Office Activities

- Review medical records to determine medical eligibility, determine approved diagnosis, and screens for care coordination needs
- Maintain database and data collection system
- Send notices of eligibility to parents, PHN, and Conduent
- Track medical appointments and send appointment authorization letters
- Provide assistance to providers and parents
- Provide orientation, training, and assist PHN's in their role as CSH care coordinators
- Monitor program effectiveness (quality assurance)
- Assure referral to medical home/primary care and other state and community resources
- Generate reports
- Do periodic needs assessments and parent/provider surveys

Local Public Health Nurse (CSH Care Coordinator) Activities

- Advise community groups and providers about CSH and other MCH programs
- Identify local and regional services available for children and youth with special health care needs and their families
- Provide local contact for CSH and other MCH programs
- Help families apply for CSH and other services
- Organize/attend team meetings
- Identify patients
- Track patients based on priority and care plan
- Help families monitor patient status, keep appointments, get transportation, learn home care, transition from home to school and to adulthood, and understand the diagnosis
- Report data to CSH

Appendix

WYOMING MATERNAL AND CHILD HEALTH PARTICIPATING PROVIDER AGREEMENT MEDICAL SERVICES

- 1. I understand this agreement must be signed and reviewed by the Administrator (or designee) of Public Health Division, Maternal and Child Health (MCH) before payment is approved for patient services. If I am a new provider for MCH and if requested, I agree that I will submit a Provider Qualifications Form or professional vita or resume.
- 2. I understand that MCH is a statewide public service, a Maternal and Child Health Block Grant Program in Public Health Division, Wyoming Department of Health. Funds available are administered under Title V Federal Regulations, State of Wyoming Administrative Rules, and MCH Rules and Regulations.
- 3. I understand that MCH assures care coordination services via Public Health Nurses (PHN) for any referred child with special health care needs and Level III Maternal High Risk and Newborn Intensive Care patients. I agree to refer these patients to the PHN and to work in partnership with the PHN on behalf of these patients.
- 4. I understand that MCH provides payment for diagnostic evaluations and medical specialty care for eligible children subject to available funds. Claims processing and payment are via the Medicaid Program's contract with their fiscal agent, Conduent (formerly Xerox). Providers must also be enrolled with Conduent to receive payment. All medical claims will be sent by electronic media to Conduent. I will refer to the Medicaid Provider Manual for claims submission instructions and requirements.
- 5. I understand that under the MCH partnership with Medicaid, payments are made based on the Medicaid fee schedule. I agree to contact MCH if I have a concern regarding reimbursement rates.
- 6. I understand MCH is available to train my office staff as needed regarding the MCH program. Conduent is available for training regarding basic billing procedure and electronic claims filing.
- 7. I understand that MCH payment is considered full and final payment for services authorized. In accepting payment, I agree that <u>no charges</u> will be made or payments accepted from the patient for these services. <u>MCH dollar caps and service limits which currently apply to patients eligible for MCH programs are in effect.</u>
- 8. I understand that all claims must be submitted within one year of the date of service to assure payment.
- 9. I agree to refund any payment if it is determined that it was not payable under MCH Rules and Regulations. Alternatively, MCH (via Conduent) may offset these amounts against future payments made for covered services.
- 10. I agree to submit a complete medical report of my findings to MCH <u>as soon as possible after an evaluation</u> but within 30 days. Copies must also be sent to the referring provider(s), Public Health Nurse, parent/guardians, and other providers as requested. MCH provides Optional Report of Evaluation forms that may be used to assure MCH obtains necessary information. I understand that report of my evaluation is critical information for care coordination services to be effective and efficient.

- 11. I agree to accept and keep one Parent/Guardian signed release of information for MCH on file to simplify sharing of information.
- 12. I understand that MCH promotes family-centered, community-based, coordinated care. I agree to coordinate and communicate as necessary with parents and other members of the healthcare team including sharing of legible medical reports, assisting with the development of healthcare plans for school or day care; working with other consultants; and providing information for other programs as requested by parent/guardian (such as SSI, education services, Children's Medicaid Waiver).
- 13. I understand that MCH promotes a medical home for every child. I agree to function as the medical home <u>or</u> assure the child is established with a medical home. (Please see the CSH Provider Handbook for the definition of a medical home.) https://health.wyo.gov/wp-content/uploads/2016/04/12-13617_ProviderHandbookupdated032013.pdf
- 14. Termination of Provider Agreement. This Agreement may be terminated, without cause, by either party upon thirty (30) days written notice. This Agreement may be terminated immediately for cause if the Provider fails to perform in accordance with, or comply with, the terms of this Agreement.

Conditions for Participation with Maternal and Child Health

I have read and accept the terms outlined	l in this Provider Agreement
Authorized Signature and Title	Date
Print your name and title	Address
Print name of provider/group	City, State, Zip
Medicaid Provider Number	Phone
Tax ID Number	
Accepted by: (MCH use only)	
Name and title	Date

Return to

Maternal and Child Health 6101 Yellowstone Road, Suite 420 Cheyenne WY 82002 Children's Special Health
Public Health Division
6101 Yellowstone Road, Suite 420
Cheyenne, WY 82002
Telephone (307)777-6921
FAX (307)777-7215

Provider Report

Patient Name: Address: Date of Birth: Date of Service: Next Appointment: Provider Name: Referred by:	
Objective (Findings):	
Assessment (Diagnosis):	
Recommendations, treatment:	
Referrals (Who, What, When, Where):	
C: PHN, Referring Physician, Parents and/or School, Dr	
MFHL-44	
08/2012	



Wyoming Maternal and Child Health (MCH) Children's Special Health

A program for Children and Youth with Special Health Care Needs
Website: https://health.wyo.gov/publichealth/mch/index-4/
(307) 777-6921 or 1-800-438-5795

Diagnostic Evaluation Policy

COVERAGE

- Your child has been approved for an appointment to attempt to establish or confirm a diagnosis with the physician listed on the enclosed letter.
- If recommended, one follow up with the same physician will be covered.
- Any additional visits must be requested by the physician and be pre-approved.
- Tests for research not covered.

MEDICATIONS

Not covered.

REQUIREMENTS

• The initial, and if recommended, follow up visit must be completed within six months.

BILLING PROCEDURES

- Report all hospital and/or medical benefits/insurance to the physician or hospital.
- Children's Special Health (CSH) will not pay until all hospital and/or medical benefits/insurance have been billed. CSH requires any hospital and/or medical benefits that you receive **be paid toward** the cost of your child's medical care. If you do not comply, CSH cannot make any payments and will close your case.
- Please call your PHN/Care Coordinator in advance if your hospital and/or medical benefits change or end.
- Have the healthcare provider's office send the bill to Conduent (formerly Xerox). The telephone number for Conduent is 1-800-251-1268 (clients 1269).
- Only Wyoming Medicaid enrolled providers can be paid.
- If you receive repeated requests for payment for CSH authorized services, please contact your PHN/Care Coordinator.
- If money is received by the family through donations, legal actions, third party payer, or other sources for services that the State of Wyoming has paid, the State of Wyoming may seek reimbursement from you.

If you have questions about your CSH coverage, contact your PHN/Care Coordinator.

Right to Appeal:

Any CSH applicant/recipient has the right to appeal a CSH decision. To appeal a decision, you must make the request in writing. We are pleased to assist you and your child. CSH welcomes any questions or comments that you may have. For general questions and local guidance about Children's Special Health, contact your Public Health Nurse.

This publication is available in an alternative format upon request by calling (307) 777-6921.



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Guidelines for Parents

Children's Special Health (CSH) is pleased to be of service to you in the care of your child with special health care needs. Our goal is to assist families to receive the best possible medical care for their child. The following guidelines are to assist you in understanding our program.

ELIGIBILITY

Your child must be a Wyoming resident under 19 years of age, a U.S. citizen or qualified alien and known to have a medically eligible condition(s), i.e. chronic illness or disability. Your child may also have insurance, Kid Care CHIP or Medicaid.

MEDICAL ELIGIBILITY

- 1. CSH is not health insurance and has very limited coverage. CSH coverage is <u>ONLY</u> for the condition(s) and provider(s) stated in your current letter of eligibility. For specific covered services for your approved condition(s), contact the Public Health Nurse (PHN). This coverage begins with the eligibility date listed on your letter. Any testing ordered must be performed by an approved provider who is enrolled in the Wyoming Medicaid Program.
- 2. CSH encourages a "medical home" for all family members, especially your child with special needs. Your medical home is a local primary doctor who will help your child get the very best care. A medical home can refer to other medical providers if your child needs specialty care (for example: a cardiologist).
- 3. Failure to follow your doctor's treatment plan or keep appointments can result in CSH closing your case.

CARE COORDINATION

You are eligible to receive assistance in coordinating your child's care from the PHN. Here are some of the areas PHNs have helped families with:

- Finding a medical home
- Finding information about your child's condition
- Finding needed services as close to home as possible
- Learning special medical techniques for caring for your child
- Working with all the professionals on a plan that meets your child's and your family's needs
- Identifying a problem and possible solutions
- Finding support in times of stress and crisis

Your family is the center of the team of providers who will be tending to the needs of your child. YOU KNOW YOUR CHILD BETTER THAN ANYONE ELSE!

CONTINUED ELIGIBILITY

- 1. You MUST inform your Public Health Nurse of any changes throughout the year, for example: address, phone, doctor, diagnosis or insurance coverage. You may be responsible for charges if your PHN is not informed of new doctors or diagnoses. A change of insurance, if not updated, may cause errors in your medical bills being paid.
- 2. Each year for continued CSH eligibility an updated "MATERNAL AND CHILD HEALTH FINANCIAL STATEMENT" will be requested by CSH.
- 3. Each year you are required to meet with your PHN to have an annual review of your child's medical care.

APPOINTMENTS

- 1. Take these items to your appointment to ensure correct billing:
 - Current eligibility letter
 - EqualityCare card
 - Your appointment letter
- 2. The medical plan with the doctor(s), hospital(s), or other service(s) must be <u>AUTHORIZED IN ADVANCE BY CSH</u>. IF THE APPOINTMENT IS NOT PART OF THE MEDICAL PLAN, WE MAY NOT PAY FOR THAT APPOINTMENT. NOTE: CSH can only approve services by Wyoming Medicaid providers.
- 3. If CSH is aware of an appointment, we will send you a letter to remind you. Parents are responsible for scheduling their child's appointments. If you must change appointment times or dates, please arrange the changes directly with your doctor (provider). PLEASE KEEP ALL APPOINTMENTS. If you have problems getting to your appointment, please call your Public Health Nurse. There may be help available for you. REPEATED FAILURE TO KEEP APPOINTMENTS MAY RESULT IN CSH CLOSING YOUR CASE.
- 4. Please remind your doctor that a copy of the **medical record** for each appointment should be mailed to your Public Health Nurse and to Children's Special Health, 6101 Yellowstone Road, Suite 420, Cheyenne, WY 82002. Please sign a release of information authorizing your provider to send records.

IF YOU HAVE INSURANCE

- You will need to REPORT ALL INSURANCE POLICIES TO THE DOCTOR OR HOSPITAL.
- Ask your provider to bill your insurance directly and/or assign benefits to your provider. This means your insurance company will pay directly to your provider. CSH expects any hospital and/or medical insurance benefits that you receive TO <u>BE PAID TOWARD</u> the cost of your child's medical care before CSH benefits are applied. If you do not send insurance benefits to the provider, CSH will close your case.
- Please call your PHN/Care Coordinator in advance if your health insurance is going to change or end.

BILLING PROCEDURES

- Your healthcare provider's office will send the bill to Conduent (formerly Xerox), the agency that pays CSH bills. If the doctor's staff tries to give you the bill, tell them to send it to Conduent, P.O. Box 547, Cheyenne, WY 82003-0547. The telephone number for Conduent is 1-800-251-1268 (clients 1269).
- CSH approved providers have signed an agreement with CSH to accept Conduent payment as payment in full for authorized services. You may receive monthly statements of your account until it is paid. Please contact your Public Health Nurse as soon as possible if you receive repeated requests for payment for CSH authorized services.
- If money is received by the family through donations, legal actions, third party payor or other sources for services that the State of Wyoming has paid, the State of Wyoming will seek reimbursement from you.
- There is a \$40,000 annual limit per child for services beginning with the eligibility date. CSH is not responsible for payment over that amount or for payment for care provided to your child before his/her eligibility date.

If you have questions about your CSH coverage, contact your PHN/Care Coordinator.

RIGHT TO APPEAL

Any CSH applicant/recipient has the right to appeal a CSH decision. To appeal a decision, you must make the request in writing. We are pleased to assist you and your child. CSH welcomes any questions or comments that you may have. For general questions and local guidance about Children's Special Health, contact your Public Health Nurse.

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Maternal and Child Health (MCH)

https://health.wyo.gov/publichealth/mch/index-4/

Wyoming Department of Health

Program Information

Maternal High Risk Program (MHR)

The Maternal High Risk Program provides payment for care of high-risk mothers at Level III centers.

Program summary:

- Payment cap applies
- Travel assistance

Newborn Intensive Care Program (NBIC)

The Newborn Intensive Care Program provides for transport and Level III Nursery care of infants in significant illness. Program summary:

- Level II care is <u>not</u> covered
- Only infants who are ventilated (CPAP) and/or have congenital anomalies
- Payment cap applies
- Travel assistance

Children's Special Health (CSH)

The purpose of Children's Special Health is to locate, track, diagnose, treat and assist in coordination of care for children in the State of Wyoming using family-centered, community-based approach. CSH provides coverage for congenital defects and chronic conditions that may allow for rehabilitation.

Program summary:

- Services are available for infants and children under 19 years of age
- Payment cap applies
- Only specialty and sub-specialty care is provided
- Services Covered:
 - o Coordination of care
 - o Diagnostic Evaluations
 - o Lab, X-Ray
 - Medical treatment and hospitalization
 - o Some equipment and medications
 - Travel assistance
 - o Translation services
- Coverage of all services is based on eligibility and available funding
- Specific Exclusions:
 - o Acute illness
 - o Infectious disease
 - Acute trauma
 - Acute surgical conditions unrelated to CSH covered diagnoses
 - Respiratory conditions including asthma and BPD
 - Allergies
 - Learning and/or behavioral problems
 - Mental Illness
 - Psychological, psychiatric or counseling services
 - o Ambulance services

Eligibility

- Eligibility is determined by the CSH program administration.
- Client must meet financial and medical eligibility requirements.
- The "Application and Financial Statement" is available at local Public Health Nursing Offices.
- Contact the local Public Health Nurse with specific questions.
- Medicaid/Kid Care recipients may also be eligible for CSH.
- Local Public Health Offices are responsible for application procedures.

Appointments and Services

- All services must be pre-authorized by CSH.
- Notify the Public Health Nursing office or CSH when appointments are missed.
- Providers, clients and Public Health Nurses are notified by CSH prior to appointments.
- Where equivalent services are available, Wyoming providers are given priority.

Reimbursement

- Your healthcare provider will submit bills to Conduent, the fiscal agent for CSH.
- CSH Providers must also be enrolled Medicaid Providers.
- Clients are required to assign insurance benefits to the provider for CSH covered services.
- CSH is the payor of "Last Resort" following all other third party payors.

Specialty Clinic Directory

Out of state travel to a child's specialist can be a hardship to families. MCH has compiled a Specialty Clinic Directory to locate a clinic by specialty and location.

https://health.wyo.gov/publichealth/mch/outreach-clinics/

Maternal and Child Health Unit

6101 Yellowstone Road, Suite 420 Cheyenne, WY 82002 307-777-6921 or 800-438-5795 Fax 307-777-7215

Conduent (Fiscal Agent)

PO Box 547 Cheyenne, WY 82003 800-251-1268 (client 1269)